



11-22-05

EXPRESS MAIL NO. EV336660082US

JFW  
#**TRANSMITTAL  
FORM***(To be used for all correspondence  
after initial filing)*

Application Number	10/667,113
Filing Date	September 18, 2003
First Named Inventor	Gabriele Barlocchi
Art Unit	2826
Examiner Name	Fazli Erdem
Attorney Docket No.	854063.552D1

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to TC ( <i>Appeal Notice, Brief, Reply Brief</i> )
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input type="checkbox"/> Other Enclosure(s) ( <i>please identify below</i> ):
<input type="checkbox"/> Information Disclosure Statement and Transmittal	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	_____
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	_____
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> CD, Number of CD(s) _____	_____
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	_____

Remarks**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	00500
Signature	<i>E. Russell Tarleton</i>		
Printed Name	E. Russell Tarleton		
Date	November 21, 2005	Reg. No.	31,800

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	*** SENT VIA EXPRESS MAIL ***		
Typed or printed name		Date:	

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).

# FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**Complete if Known**

Application Number	10/667,113
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TOTAL AMOUNT OF PAYMENT (\$800)

## METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**
- ☐ Charge any additional fee(s) or underpayments ☒ Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

**Warning:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
<u>33</u> -25 or HP = <u>8</u> X <u>50</u> = <u>400</u>				Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
<u>7</u> -5 or HP = <u>2</u> X <u>200</u> = <u>400</u>			

HP = highest number of independent claims paid for, if greater than 3

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ -100 = _____ /50 = _____ (round up to a whole number) x _____				

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

## SUBMITTED BY

Signature	<u>E. Russell Tarleton</u>	Registration No. (Attorney/Agent)	31,800	Telephone	206-622-4900
Name (Print/Type)	E. Russell Tarleton	Date	November 21, 2005		



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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Gabriele Barlocchi et al.  
Application No. : 10/667,113  
Filed : September 18, 2003  
For : METHOD FOR FORMING HORIZONTAL BURIED CHANNELS  
OR CAVITIES IN WAFERS OF MONOCRYSTALLINE  
SEMICONDUCTOR MATERIAL

Examiner : Fazli Erdem  
Art Unit : 2826  
Docket No. : 854063.552D1  
Date : November 21, 2005

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Commissioner for Patents:

In response to the Office Action dated August 24, 2005, please amend the application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.

11/25/2005 WABDELRI 00000014 10667113

01 FC:1201 400.00 OP  
02 FC:1202 400.00 OP